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Application Number	09/989,783
Filing Date	11/20/2001
First Named Inventor	Thomas J. Boyle
Art Unit	3752
Examiner Name	HWU, Davis D.
Attorney Docket Number	30868/04000

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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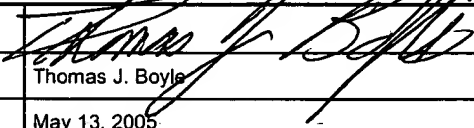
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE OF Applicant or Assignee of Record

Signature			
Name	Thomas J. Boyle		
Date	May 13, 2005	Telephone	614-284-8400

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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